

## BEST AVAILABLE COPY

SERIAL NO. 10-049979  
APPLICANT(S)

FILING DATE

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

CLAIMS	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
	1											
2							51					
3							52					
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43							92					
44							93					
45							94					
46							95					
47							96					
48							97					
49							98					
50							99					
TOTAL IND.	2						100					
TOTAL DEP.	14						TOTAL IND.					
TOTAL CLAIMS	16						TOTAL DEP.					
FTO-1360 (3-78)							TOTAL CLAIMS					